

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>		<i>4/20/99</i>
I.P.E. CLASSIFIER			<i>4-29-99</i>
FORMALITY REVIEW	<i>S.S.</i>	<i>69134</i>	<i>4-29-99</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
—	Allowed	I	Interference
(Through numeral)	Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
Final	
Original	
1	11/10/99
2	3/3/00
3	12/3/00
4	02/04/01
5	09/07/03
6	11/11/03
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Claim	Date
Final	
Original	
1	4/20/99
2	4/20/99
3	4/20/99
4	4/20/99
5	4/20/99
6	4/20/99
7	4/20/99
8	4/20/99
9	4/20/99
10	4/20/99
11	4/20/99
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42	4/20/99
43	4/20/99
44	4/20/99
45	4/20/99
46	4/20/99
47	4/20/99
48	4/20/99
49	4/20/99
50	4/20/99

Claim	Date
Final	
Original	
101	11/10/99
102	3/3/00
103	12/3/00
104	02/04/01
105	09/07/03
106	11/11/03
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If more than 150 claims or 10 actions
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